## Supplemental Demographic Information What is the highest grade or year of school the patient has completed? What is the patients current employment status? What is the patients current housing status? If apartment or single family home, household size : In the past 12 months have you delayed receiving healthcare for any of the following reasons? Annual household income from all sources in past 12 months: Investigation Initiation Investigation Initiation Date: mm/dd/yyyy **Contact Tracing** Neisseria meningitidis, invasive (Mening. disease) **Patient**

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